PHONE NO. : 15154324767

AMPAIGN DISCLOSURE D File with: Reset Form lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A FOR INSTRUCTIONS, SEE BACK OF FORM Des Moines, lowa 50319 2012 JUL 18 AM 7: 38 Fax: 515-281-4073 DISCLOSURE SUMMARY PAGE COMMITTEE NAME (Must be same as on Statement of Organization) FORM Hompson Elect 10 Committe DR-2 DISCLOSURE IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Stateward of Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party

(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision PAC (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) 1 and Rethal legis. (Rev. 07/2007) REPORT For Office Use Only Comm. # 18 11) Local Ballot Issue Logged in CANDIDATE COMMITTEES ONLY: Political Party (if applicable) Candidate Name epublican Glen Office Sought Late reports are subject to possible civil and criminal penalties. Pursuant to lows Code sections 68B.32A(7) and 68A.401(3), the candidate, for a -432-476 TELEPHONE SIGNATURE OF PERSON FILING REPORT REPORT FOR (1) ELECTION /(Z)NON-ELECTION YEAR. disclosure I AM FILING A Indicate by # 1 (report date) Local Committees, enter Date of Election □CHECK IF AMENDMENT TO REPORT DATED County & Local Committees, enter County in Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.) STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the

committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	-0 -
ADD TOTAL MONEY TAKEN IN THIS PERIOD	-
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	- 0 -
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
(Schedule H applies to Candidates' Committees Only) SUB-TOTAL\$	-0-
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B; Expenditures total (Attach Schedule B) (**also see debts and loans below)	000
Schedule F: Loan Repayments total (Attach Schedule F) CASH ON HAND at the end of this reporting period (if final report balance must be zero)	-0-
**UNPAID BILLS (From Schedule D - Attach Schedule D)\$	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	-0-
SCHOOLSTANDING LOANS (From Schodule F - Attach Schodule F)	-0-
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES NO
CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$	-0-
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.	

For Instructions, See Back of Form	Reset Form	SCHEDULE	MONETARY
CONTRIBUTIONS MONEY TAKEN IN		(Rev. 07/03)	RECEIPTS
(Including candidate's personal funds)		CHEC	NOING FORM
COMMITTEE NAME (Must be same as on Statement of Organization)	,		
Committee To Elect Thomps		LIST THE PAC ID	ENTIFICATION

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAG (POLITICAL ACTION COMMITTEE). LIST THE PAG IDENTIFICATION NUMBER AND THE PAG CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
	ID#			\$	
	CK#				
	ID#	1.11.1400			
	CK#				
	ID#				
	CK#				
*****	ID#				
	CK#				
	1D#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	1D#				
	CK#				
	ID#				
	CK#				
**	ID#				
	CK#				
			SUB-TOTAL	\$	
		TOTAL (If last	page of this schedule	5 0	_

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of _____

FOR INSTRUCTIONS, SEE BA	ICK OF	is Courtin
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**	4"
RESCI	Form

SCHEDULE B MONETARY EXPENDITURES (Rev. 07/03)

CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE	NAME (Must be se	arrie as on Statement of Organization)	NDSON AUDONE	
Com	mitte	NAME AND ADDRESS TO WHOM	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	EXPENDITURE (Diaburnement) WAS MADE	(DESCRIBE TRANSPORTOR)	
	10#			5
	CK#			
	ID#			
	CK#			
	1D#			
	CK#			
	ID#			
September 1	CK#			
	ID#			and of the first limit
others	CK#			
	1D#			
2000 CO	CK#			
	ID#			
A 2000	CK#			
	ID#			
CT C	CK#		SUB-T	OTAL IS
				1
			TOTAL (if last page of this soh	odule) 5

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lower Code 65A, 402(3)(b.)

(for Schedule 2)